

Case Number:	CM14-0044221		
Date Assigned:	07/02/2014	Date of Injury:	09/03/2004
Decision Date:	08/05/2014	UR Denial Date:	04/07/2014
Priority:	Standard	Application Received:	04/11/2014

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Orthopedic Surgery and is licensed to practice in California. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The expert reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

The patient is a 63 year old male with reported industrial injury 9/3/04. Claimant is status post knee arthroscopy on 1/6/06 and is status post left knee arthroscopic partial medial and lateral meniscectomy, chondroplasty of patellofemoral joint and medial/lateral compartment, extensive 3 compartment synovectomy/debridement and plica excision on 9/21/07. Status post right knee replacement surgery on 12/29/11. AME 4/1/13 demonstrates need for weight reduction to be made a priority. Occupational medicine note from 3/12/14 demonstrates claimant is not working. Report is made that claimant is trying to lose weight but is getting depressed. Report of knee pain bilaterally. CT scan of right knee 1/18/13 demonstrates no evidence of periprosthetic lucency to suggest loosening or infection.

IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

Surgery of both knees: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines - Surgery: Knee Arthroplasty.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 7, page 127.

Decision rationale: According to the ACOEM guidelines Chapter 7, occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial facts are present, or when the plan or course of care may benefit from additional expertise. In this case the notes from 3/12/14 does not demonstrate any rationale for the type of surgery for bilateral knees. Therefore the request for surgery of both knees is not medically necessary and appropriate.

Second opinion from a Bariatric Surgeon: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 7, page 127.

Decision rationale: Per the CA MTUS ACOEM 2004, Chapter 7, page 127 states the occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial facts are present, or when the plan or course of care may benefit from additional expertise. In this case the exam notes from 3/12/14 does not demonstrate any attempts at prior attempts at weight loss to warrant a bariatric surgeon referral. Therefore the request for a second opinion from a Bariatric Surgeon is not medically necessary and appropriate.

Supportive psychiatric treatment: Upheld

Claims Administrator guideline: Decision based on MTUS ACOEM Page(s): 107, 114-115 and 394-402.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 7, page 127.

Decision rationale: The California ACOEM Guidelines (2004), Chapter 7, states the occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial facts are present, or when the plan or course of care may benefit from additional expertise. There is no documentation in the records of 3/12/14 of psychiatric symptoms or red flags to warrant psychiatric treatment. Therefore the request for a supportive psychiatric treatment is not medically necessary and appropriate.

Orthopedic consultation for second opinion regarding knee replacements: Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines - Knee Arthroplasty.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation American College of Occupational and Environmental Medicine (ACOEM), 2nd Edition, (2004) Chapter 7, page 127.

Decision rationale: The California ACOEM Guidelines (2004), Chapter 7 states the occupational health practitioner may refer to other specialists if a diagnosis is uncertain or extremely complex, when psychosocial facts are present, or when the plan or course of care may benefit from additional expertise. In this case there is no medical rationale from the exam note of 3/12/14 to support orthopedic consultation for knee replacements. The CT scan of the right knee from 1/18/13 is negative for loosening. There is no documentation of attempts at conservative care. There is no documented physical examination. There is no documentation of what type of surgery is being requested or what diagnosis is present. Therefore the request for a orthopedic consultation for second opinion regarding knee replacements is not medically necessary and appropriate.